

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		08-22-01
O.I.P.E. CLASSIFIER			8-10-01
FORMALITY REVIEW	AM	917	09-04-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 u Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	103	
2	✓	104	
3	✓	105	
4	✓	106	
5	✓	107	
6	✓	108	
7	✓	109	
8	✓	110	
9	✓	111	
10	✓	112	
11	✓	113	
12	✓	114	
13	✓	115	
14	✓	116	
15	✓	117	
16	✓	118	
17	✓	119	
18	✓	120	
19	✓	121	
20	✓	122	
21	✓	123	
22	✓	124	
23	✓	125	
24	✓	126	
25	✓	127	
26	✓	128	
27	✓	129	
28	✓	130	
29	✓	131	
30	✓	132	
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36	✓	138	
37	✓	139	
38	✓	140	
39	✓	141	
40	✓	142	
41	✓	143	
42	✓	144	
43	✓	145	
44	✓	146	
45	✓	147	
46	✓	148	
47	✓	149	
48	✓	150	

Claim	Final	Original	Date
51	✓	103	
52	✓	104	
53	✓	105	
54	✓	106	
55	✓	107	
56	✓	108	
57	✓	109	
58	✓	110	
59	✓	111	
60	✓	112	
61	✓	113	
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67	✓	119	
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69	✓	121	
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77	✓	129	
78	✓	130	
79	✓	131	
80	✓	132	
81	✓	133	
82	✓	134	
83	✓	135	
84	✓	136	
85	✓	137	
86	✓	138	
87	✓	139	
88	✓	140	
89	✓	141	
90	✓	142	
91	✓	143	
92	✓	144	
93	✓	145	
94	✓	146	
95	✓	147	
96	✓	148	
97	✓	149	
98	✓	150	

Claim	Final	Original	Date
101	✓	103	
102	✓	104	
103	✓	105	
104	✓	106	
105	✓	107	
106	✓	108	
107	✓	109	
108	✓	110	
109	✓	111	
110	✓	112	
111	✓	113	
112	✓	114	
113	✓	115	
114	✓	116	
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116	✓	118	
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118	✓	120	
119	✓	121	
120	✓	122	
121	✓	123	
122	✓	124	
123	✓	125	
124	✓	126	
125	✓	127	
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136	✓	138	
137	✓	139	
138	✓	140	
139	✓	141	
140	✓	142	
141	✓	143	
142	✓	144	
143	✓	145	
144	✓	146	
145	✓	147	
146	✓	148	
147	✓	149	
148	✓	150	

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

04/10/01